

## Nebraska's Capital City

May 6, 2002

Mayor Wesely and City Council City of Lincoln City County Building Lincoln, NE

Mayor Wesely and Members of the City Council:

An investigation has been made regarding the application of Bugeater Investments Inc., d.b.a. Cliff's Lounge, 140 North 12<sup>th</sup> Street requesting a class C liquor license for this location.

Bugeater Investments is the current owner of the Watering Hole, and has purchased Cliff's Lounge. They request that Evelyn McFarland be approved as the manager of Cliff's Lounge.

Background information on Evelyn McFarland will be omitted as the Council approved Evelyn McFarland as the manager of the Watering Hole in February 2001.

Stockholder information is included for your review.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

THOMAS K. CASADY, Chief of Police

Think has







Mike Johanns Governor

A2-048991

NEBRASKA LIQUOR CONTROL COMMISSION Forrest D. Chapman

Executive Director

301 Centennial Mall South. 5th Floor P.O. Box 95046

Lincoln, Nebraska 68509-5046 Phone (402) 471-2571

April 30, 2002

Phone (402) 171-2571
Fax (402) 471-2571
Fax (402) 471-2814
TRS USER 800 833-7352 ITTY)
The N 12th t.

Class C.

Class C.

Class C.

Class C.

Dear Local Governing Body:

County/City Bldg

Lincoln NE 68508

City Clerk

555 S 10th

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

## TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission 1) (§53-134). You may choose NOT to make a recommendation of approval or denial to our Commission.

PER \$53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- There is a recommendation of denial from the local governing body. 1)
- 2) A citizens protest: or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE...A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS; AND, A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees:
- 2) Physical possession of the license:
- 3) Effective date on the license.

Sincerely,

NEBRASKA LIQUOR CONTROL COMMISSION

Enclosures Rhonda R. Flower

Commissioner

**Bob Logsdon** Chairman

R.L. (Dick) Coyne Commissioner

An Equal Opportunity Affirmatice Action Employer

Printed with soy ink an recycled paper

FORM 35-4001 REV. 12 99

Approved 2-01.

## APPLICATION FOR LICENSE

Nebraska Liquor Control Commission PO Box 95046, 301 Centennial Mall South Lincoln, NE 68509-5046 http://www.nol.org/home/NLCC/

Phone: (402) 471-2571 Fax: (402) 471-2814 RECEIVED C 554/19 APR 2.3 2002

> NEBRASIVA LIQUOR CONTROL COMMISSION

INSTRUCTIONS: Include: 1. Applicable fees payable to Liquor Control Commission 2. Copy of birth certificate or naturalization papers proving U.S. citizenship for each individual and spouse named on application (not required of corporations or spouse(s) who file an affidavit of no interest with application. Commission form 4178—3. Corporations must include copy of articles of incorporation as filed with the Secretary of States office in the state of Nebraska 4. Commission checklist, form 4251–5. Fingerprint cards and

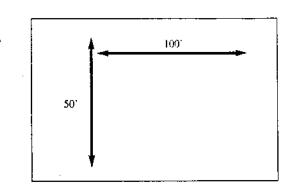
processing fees (are required of individuals, all partners and spouses. Corporate applicants must file for CEO/Manager & stockholders/member holding over 25% stock/interest. 6. All applications must be typewritten or <u>printed</u> clearly. 7. Submit in <u>Triplicate</u>

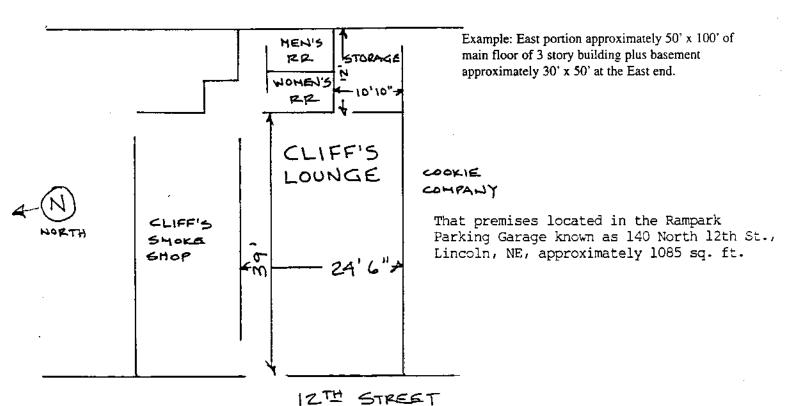
CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND LIST OF FEES FOR EACH

CLASS OF LICENSE FOR WHICH A	APPLICATION IS M					
Class of License		Registration	License	Corporate		
(Check applicable class)	·	Fee	Fees	Surety Bond		
A Beer, On Sale Only - Inside Corporate Limit	ls	\$45.00	Collected at Local Level	exempt		
F Beer, On Sale Only - Outside Corporate Lin		\$45.00	Collected at Local Level	exempt		
B Beer, Off Sale Only - Indicate Inside or Out	side Corporate Limits	\$45.00	Collected at Local Level	exempt		
J Wine, Beer, On Sale Only - Inside Corporate	e Limits	\$45.00	Collected at Local Level	exempt		
! Spirits, Wine, Beer, On Sale Only - Inside C		\$45.00	Collected at Local Level	exempt		
D Spirits, Wine, Beer, Off Sale Only - Inside C	orporate Limits	\$45.00	\$150.00	exempt		
D1 Spirits, Wine, Beer, Off Sale only – within						
extraterritorial zoning jurisdiction		\$45.00	\$150.00	exempt		
X C Spirits, Wine, Beer On & Off Sale - Inside C	Corporate Limits	\$45.00	Collected at Local Level	exempt		
M Bottle Club (Spirits, Wine, Beer, on Sale)		\$45.00	Collected at Local Level	exempt		
H Nonprofit Corporation	<del></del>	\$45.00	Collected at Local Level	exempt		
K Wine Only, Off Sale	·	\$45.00	Collected at Local Level	exempt		
C Boat	<del></del>	\$45.00	\$ 50.00	exempt		
V Manufacturer of Beer, Wine & Distilled Spir	nts	\$45.00	Varies \$100 to \$1,000	\$10,000 min.		
X Wholesale Liquor		\$45.00	\$500.00	\$ 5,000 min.		
W Wholesale Beer		\$45.00	\$250.00	\$ 5,000 min. \$ 1,000 min.		
Y Farm Winery						
L Craft Brewery (Brew Pub)		·	\$ 1,000 min.			
TYPE OF APPLICATION	RATE SURETY BOND INFORMATION  Classes L V W X Y only					
Type of application being applied for (place appropriate number in box)  l= Individual License requires						
Form 1 to be attached.  2= Partnership License requires Form 2 to be attached.  3= Corporate License requires Form 3 and 4 and Manager Application be attached.	y/Year	Bond Number				
SECTION A - LOCATION D	 NFORMATION - MU	ıst be comple	ted by all applicants			
Trade Name (name of business)	Felephone Number at premise to be licensed					
Cliff's Lounge		(402) 476-7997				
1) Street Address of Proposed licensed premise	2) Mailing Ad	Address for receipt of				
140 North 12th Street	Liquor Cor	Liquor Control Commission mailings				
	12.51	(* <del>*</del> )	Street Alln: Ex	4/1		
City County Zip Coc	le City		County 2	Zig Code		
Lincoln Lancaster 68508	s Linus's	` (	Arrague la	850 <sup>9</sup>		
<u> </u>				FORM 35-4010		

ORM 35-4010 Page 1 Rev. 7/01 DESCRIPTION AND DIMORANI OF THE STRUCTURE TO BE ELECTRODE

In the space provided draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations where only a portion of the entire bldg, is to be covered by the license. No blue prints will be accepted. Be sure to indicate the direction North and number of floors of the building.





SECTION B OTHER INFORMA	TION I	REQUI	RED
	Yes	No	Explanation/Comments
Has anyone who is a party to this application, or their spouse, ever been convicted of or plead guilty to any criminal charge. Criminal charge means any charge alleging a felony or misdemeanor or violation of a federal or state aw: or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.	Yes		Bryen McFarland Disturbing the Peace 3/97 Disturbing the Peace 4/95 Consuming Alcohol in Public 9/92 Lincoln, NE

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	Yes	No	Explanation/Comments		
2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required).	Yes		C 43473 See Attached		
3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license? If yes, attach copy.	Yes		See Attached		
Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.	Yes		TragoLargo, Inc.		
5. Will any person or entity other than licensee be entitled to a share of the profits of the establishment? If yes, explain.		No			
6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.		No			
Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain?		No			
8. Are the premises to be licensed within 150 ft. of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft. of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Per Sec. §53-177.		No			
9. Is anyone listed on this application a law enforcement officer? If yes, lis the person, the law enforcement agency involved and the persons exact duties	t es.	No			
10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the person(s) who will be authorized to write cheeks and/or make withdrawals on accounts at such institutions.	Eve Ani	lyn M ta Ho	ergo Bank McFarland Olden McFarland Farland		
11. List all past and present liquor licenses held by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.	#49 The 132	#49599 Presently Held The Watering Hole 1321 "O" Street Bugeater Investments, Inc.			
12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.	Eve	Evelyn McFarland, 20 hrs			
13. List the training and experience of the person listed in #12 above in connection with selling and/or serving alcohol products.		Current Manager of The Watering Hole			
44. If the property for which this license is sought is owned, submit a cop of the deed, or proof of ownership, if leased submit a copy of the lease covering the entire license year. (Documents must show title or lease held interest in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed).	See		ached lease		
14. When do you intend to open for business?	Ar	oril	29, 2002		

sheet. NAME	FROM (YEAR)	TO (YEAR)	RESIDENCE (CITY STATE)
See Attached		<u> </u>	
		<u> </u>	<del> </del>

The undersigned applicant(s) hereby consent(s) to a background investigation and release of present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete and/or inaccurate.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public. Must be signed by applicant and spouse; if a partnership, all partners and spouses must sign and corporation, all stockholders/members (holding more than 25% of the stock or interest), officers, directors and spouses must sign. Full names only, initials not acceptable.

sign here sign here sign here	Bot 1/2th 10 fich	sign here sign here sign here				
sign here		here			····	
Subsc	ribed in my presence and sworn to before me this _	25 <sup>24</sup> . EVELYN M. MCFARLANI	day of	ipnil	<i><u>200</u></i>	2
appl	compliance with ADA, this lication for license form is	MY COMMISSION EXPIRE		l al	0) ( (	,

In compliance with ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

sign

Notary Public Signature

FORM 35-4010

Rev. 7/01

## **QUESTION #16:**

## Anita Holden McFarland

Lincoln, NE

1990 - 1997

Tucson, AZ

1997 – 1998

Davis, CA

1998 - 2001

Henderson, NV

2001 - Present

## Bryan McFarland

Lincoln, NE

1990 - 1997

Ashland, NE

1997 – 1998

Davis, CA

1998 - 2001

Henderson, NV

2001 - Present

## STATE OF NEBRASKA LIQUOR CONTROL COMMISSION

INQUIRE

LICENSE NUMBER 43673

OWNERSHIP C

CLASS C ALCOHOLIC LIQ ON/OFF SALE

P - PARTNERSHIP APR 2 GORDORATION

NEBRASKA LIQUOR \* \* \* \* \* \* \* \* \* \* \* \* BOND INFORMATION \* \* \* \* CONTROL COMMISSION

BOND COMPANY START DATE CANCEL DATE EOND COMPANY BOND NUMBER

\* \* \* \* \* \* \* \* \* \* \* \* \* PREMISE INFORMATION \* \* \* \* \* \* \* \* \* \* \*

TRADE NAME CLIFF'S LOUNGE

ADDRESS-1 140 N 12 ST LINCOLN CITY

ADDRESS-2 ZIP 68508

COUNTY 02 LANCASTER

CORP. LIMITS Y (Y OR N)

PHONE

402 476 0119

IRREGULAR SHAPED AREA APPROX 24' X 57' ON 1ST FLOOR OF RAMPARK

OWN LEASE REPLACING SECURITY HEARING SUSPENDED LICENSE EXPREMISES EXP. LIC. NO. COST COST START DAYS DATE PREMISES EXP. LIC. NO. COST (Y OR N) DATE

N 05312004 14595

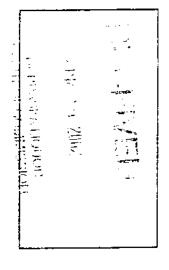
10312002

DEPRESS: ENTER - PROCESS PF12 - HISTORY PA1 - RETURN TO MENU

Date: 4/29/02 Time: 10:02:37 AM

## Corporation/LLC Application for License - Form 3 Nebraska Liquor Control Commission

- INSTRUCTIONS:
- 2) Fingerprint cards (2 cards per person) must be submitted for: a) each stockholder owning over 25% of the stock, b) chief executive officer, c) proposed manager and d) all spouses 1) Application and application for manager must be typewritten and submitted in triplicate
- Information regarding spouses must be completed



Name of Corporation That Will Hold License. Attach copy of Articles of Incorporation	Articles of Incorpo	ration		Fotal Number of Shares (if corporation)	nes (if corporation	
Bugeater Investments, Inc.				1000		_
Corporate Street Address(I) 1321 "O" Street		Nailing address for receipt of Liquor Control Commission N	Mailing address for receipt of Liquor Control Commission Mailings	ngs	Corporate Telephone Number (402) 438-3054	phone Number 18 – 3054
City	County		State		Zip Code	
Lincoln	Lar	Lancaster	7	NE	68	68508
Name of Registered Agent		Name of Pr	Name of Proposed Manager			
Evelyn McFarland	ď			Evelyn McFarland	rland	
IN THIS SECTION LIST THE NAME OF THE CHIEF EXECUTIVE OFFICER	V LIST THE NAM	IE OF THE CH	EF EXECUTIVE	OFFICER		
Name		Title		Date of Birth		Social Security Number
Anita Kay Holden-McFarland		CEO		3/5/61		527-63-8235
Home Address (1)					State	-
217 Camelback Ridge Avenue					NV	
City		State	Zip Code	Home Telephone Number	me Number	
Henderson		NV	89012	(702) 4	(702) 407-8619	••
						77

# Corporation/LLC Application for License - Form 3

PRINCIPLE OFFICERS, DIRECTORS, STOCKHOLDERS, MEMBERS	NS, STOCKHOLDERS, MEN	IBERS AND SPOUSES	JSES	
Name of Officers, Directors, Members and Spouses. Give Last Name, First Name, Middle, Maiden, and any aliases	Social Security Number	Date of Birth	Title	Number of Shares/%
NAME Anita Kay Holden-McFarland	527-63-8235	3/5/61	Pres/CEO	100%
Spouse Name Bryan Andrew McFarland	506-04-5276	2/4/68	Treas/CFO	О
NAME Bryan Andrew McFarland	506-04-5276	2/4/68	Treas/CFO	0
Spouse Name Anita Kay Holden-McFarland	527-63-8235	3/5/61	Pres/CEO	100%
NAME				
Spouse Name				
NAME				
Spouse Name				
NAME				
Spouse Name				
NAME				
Spouse Name				

(If Necessary, Continue on Separate Sheet)

# Corporation/LLC Application for License - Form 3 Nebraska Liquor Control Commission

STATE OF NEWADA SS.  CLARK County  ROLAND P. ST. GERMAN JR.  ROLAND P. ST. GERMAN JR.  Appointment to 2051/4881  My Appointment to 2051/4881  My Appointment to 2051/4881  My Appointment to 2051/4881	If YES, LIST EACH STOCKHOLDER/MEMBER OWNING MORE THAN 25% stock/interest in that corporation/LLC. Any applicant who has a Corporation as a shareholder MUST file an organizational chart listing all shareholders and/or corporations owning more than 25% stock and listing of the percentage of stock owned.  Please indicate below your corporate tax year with the IRS.  Starting Date:Jan_1Ending Date: _Dec_31	Is this Corporation/LLC controlled by another Corporation? ロYES 梨 NO Name of Control Corporation
--	--	--

FORM 35-4183 Page 3 REV 02/01

## **Application for Corporate Manager**

## \*Must Be A Nebraska Resident\* Please submit in Triplicate

RECEIVED

Return to:

Nebraska Liquor Control Commission, PO Box 95046

301 Centennial Mall So., Lincoln NE 68509

Phone: (402) 471-2571 Fax: (402) 471-2814 Web address: http://www.nol.org/home/NLCC/

APR 2 × 2002

	LIQUOR	LICENSE	INFORMA	TION		NEBRAS:	∠LIQUOR
NAME OF LICENSED CORPORATION		<del></del>			LASS & LIC	CENSE NUN	COMMISSION
Bugeater Investments	Inc.				C 436	73	_
TRADE NAME OF LICENSED PREMISE							<del>-</del>
Cliff's Lounge							
STREET ADDRESS OF LICENSED PREMISE	CITY		COL	INTY			ZIP CODE
140 N 12th Street	Li	ncoln		Lanc	aster		68508
On behalf of the corporation, I designate this individ-	ual as corpora	ite manager.					
Signature of Corporate Presider	ıt/CEO:	Ari	LK &	kgl de	-Ma	jade-	
APPLICANT	INFOR	MATION	(MUST	BE 21 (	OR OVE	<b>R</b> )	
NAME (LAST, FIRST, MIDDLE, MAIDEN)	SEX	SOCIAL	. SECURITY	NUMBE	R DATE C	F BIRTH	PLACE OF BIRTH
McFarland, Evelyn M. (Fish	) F M F	512	-26-383	5	02-9	1-33	Hiawatha, KS
HOME STREET ADDRESS		CITY		COUNT	ΓY	STATE	ZIP CODE
7001 Carol Circle		Linco	ln	Lan	çaster	NE	68505
HOME TELEPHONE NUMBER	1	ss teleph <u>113</u> 8–3	IONE NUMBI 054	ER		ERS LICEN 166367	SE NUMBER & STATE
SPOUSE'S INFOR	MATION	(IF NO	T MARRI	ED IN	DICATE	NONE)	
FULL NAME (LAST, FIRST, MIDDLE, MAIDEN)			SOCIAL SEC	CURITY	NUMBER	1	RS LICENSE NUMBER
NOME						& STAT	E
DATE OF BIRTH:			PLACE OF B	RRTH:	<del></del>	1	
					<del></del>		

## READ CAREFULLY - Answer completely and accurately.

Has anyone who is a party to this application or their spouse, <u>ever</u> been convicted of or plead guilty to any criminal charge? Criminal charge means any charge alleging a felony or misdemeanor violation of a federal or state law; or a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or piec. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

I YES ∑YNO

E YES I NO I 49599

<sup>2.</sup> Have you or your spouse ever made application for any liquor license or manager for any liquor license? IF YES, for what premise give license number and date.

<ul><li>3. Have yo</li><li>☐ YES</li></ul>	u or your spo Z NO	ouse ever made a compromi	se settlem	ent for vi	olation c	of such laws?			
		r, have all the qualifications Act (§53-131.01)	required	by any pe	rson ent	itled to hold a Nebraska Liqu	or Licer	ise?	
XXYES	□ NO								
5. Have yo	u filed finger	print cards and PROPER I	EES (if o	heck, ma	de out to	the NE State Patrol), with the	is appli	cation?	<del></del>
□ YES	₩ NO						••		
<u> </u>	L YOT DDIAY	CONT. DECIDENCE FO	D D4 Cm 4	A 175 4 D	C + NDY	VG L NEW CENOVICE A CO			
A PDI TO A NITA	CITY & STATE	····· · · · · · · · · · · · · · · · ·		OYEAR:		ICANT AND SPOUSE MU	SF CO	1	EAR
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			i.		<u> </u>			<u> </u> 	
<u> </u>		EMPI O	VEDS_1	] 	 ST TWC	) EMPLOYERS			1
VI	EAR	NAME OF EMPLOYER	I ERS - L	151 LA		NAME OF SUPERVISOR		LEPHONE )	VI 'NIBED
FROM	10					I THE OF SELECTION			10.HBER
10-200	preser	t Watering Hol	.e			Bryan McFarland	1:	02) 79	1-6451
1968	12-2001	Home Feal Est	ate			Larry Melichar	(4)	02) 43	6 <b>-</b> 3332
PE	ERSONAL C	OATH AND CONSENT O	F INVEST	ΓΙGAΤΙΟ	)N – MI	JST BE SIGNED BY APPL	ICANT	& SPOU	SE
The above indisapplication, the application, the The undersigne (State and Fede	at said application application applicantis) sha ed applicant here eral), and bank of	) SS  5 0 \$ 27  First duly sworn upon oath, deposes on has been read and that the control be deemed guilty of perjury and by consents to an investigation of r lending institution records, and a	ents thereof I subject to p Ins/her bac! said applican	and all star senalties pro- tground ine- it and spous	ements co wheel by h luding all i e waive an	the applicant ana/or pouse of applicantained therein are mic. if any false aw. (Sec. §53-131., 1 Nebraska Liquitecords of every kind and descriptionly rights or causes of action that said formation to the Nebraska Liquor C	statement wor Donton mindluding appropria	r is made i p i Act. g polica reco i mstouse to	ing part of this ros, tax records to have against
interest careerly	or indirectly, ar	a affidavit may be attached howe	ever, singerp	rint cards	are still re	quired to be alled. submitted in this application, is sub-			
containes: Ferei	n is incomplete:	and inaccurate.							
£1-	hon	M. Mc far	land						
1	./ "	ignature of Applicant	41			Signature of Spouse	if applies	blei	
Subscribed in a day of		sworn to before me this 38	=71 -			rd in my presence and swom to before	re me this 		
-71-m	u 2/	Intracter.	<u></u>						
-	No	tary Signature & Seal  A GENERAL NOTARY-STAT  Noma V. Crais  My Comm. Exp. Ju	anderg			Notary Signatur	e & Seai		FORM 15-4017 REV 5301 PAGE 2